

# Foster Family Home - Corrective Action Report

Provider ID: 2-100018

Home Name: Estelita Casino, CNA

5-652 Puhoaloaha Place

Hailua-Kona

HI 96740

Review ID: 2-100018-4

Reviewer: Carol Copeland

Begin Date: 1/10/2018

End Date: 1-18-18

Foster Family Home Required Certificate

[17-1454-6]

(d)(1) Comply with all applicable requirements in this chapter; and

Comment:

Home visit survey performed to recertify three client home. Home in compliance on day of survey. Corrective Action report issued with no plan of correction due to CTA. Home is eligible for a two year recertification for three clients.

Carol Copeland RN, MSN  
Compliance Manager

Estelita Casino  
Primary Care Giver

1-18-18  
Date

1-13-18  
Date